DUTY STATEMENT

Classification: Career Executive Assignment Level B	
Working Title: Chief, Medi-Cal Eligibility Division	
Program: Health Care Benefits and Eligibility	
Division: Medi-Cal Eligibility Division	
Branch:	
Section:	
Unit:	
Office Location: 1501 Capitol Avenue, Sacramento, CA 95814	
COI Position: ☑ Yes ☐ No	Telework Eligible: ☑ Yes ☐ No
CBID: M01	Position Number: 805-300-7500-002
Bilingual Position: ☐ Yes ☑ No	Specify Language:

This position requires the incumbent to perform their essential functions; maintain consistent and regular attendance in-person and/or virtually; to communicate effectively and professionally, both orally and in writing; to develop and maintain knowledge and skills related to specific tasks, methodologies, materials, tools, and equipment; to complete assignments in a timely manner; and to adhere to departmental policies and procedures regarding attendance and conduct including those outlined in the Health Administrative Manual and the DHCS Telework Program. To promote collaboration and connection, essential functions are generally in-person consistent with the DHCS Telework Program and pursuant to an approved Telework Agreement.

Job Summary:

Under the general direction of the Assistant Deputy Director (ADD), Health Care Benefits and Eligibility, the Chief, MCED, provides leadership, direction, and coordination of eligibility policy and operations among the Department, California counties, and the federal government regarding Medicaid (Medi-Cal in California) and the Children's Health Insurance Program (CHIP). The Chief, MCED is responsible for ensuring consistency with current state and federal Medi-Cal and CHIP statutes, regulations, and policies. The Chief, MCED is responsible for oversight and management of issues pertaining to the eligibility and enrollment system infrastructure used to support Medi-Cal and CHIP eligibility determinations and providing policy direction for needed system changes.

The Chief, MCED is responsible for the development and implementation of new eligibility categories and programs based upon changes to federal and state law. The Chief, MCED advises and consults with the Department of Health Care Services Director, Chief Deputy Directors, Deputy Director (DD), California Health and Human Services Agency (CHHS), and Governor's Office on matters of significant policy impact regarding program eligibility. The Chief, MCED represents DHCS with public and private organizations, and local, state, and federal government officials on Medi-Cal eligibility matters. The Chief, MCED interacts with the Department of Finance, the Legislature, and other state agencies, the State's data center, and other departments, including the Departments of Social Services and Developmental Services and Covered California. The Chief, MCED coordinates and directs program review activities in relation to program policy development and implementation and oversight of county administrative functions related to Medi-Cal eligibility determinations.

Job Summary (cont):

The duties contained in this job description reflect general details as necessary to describe the principal functions of this job. It should not be considered an all-inclusive listing of work requirements. The incumbent of this position may perform other duties (commensurate with this classification) as assigned, including work in other functional areas to cover during absences, to equalize peak work periods or to otherwise balance the workload.

Description of Duties:	
% of Time	**Essential Functions**
30%	Acts as the Department's principal advisor to the DD, HCBE, on Medi-Cal and CHIP eligibility policies, procedures and program review. As appropriate, meets with the DHCS Director and Chief Deputy Directors, CalHHS, the Legislature and relevant federal and state representatives, advocates and stakeholder organizations, including the California Welfare Directors Association, on policy matters pertaining to program eligibility policies and procedures.
30%	Develops Medi-Cal and CHIP eligibility program goals, objectives, policies, and directions. Reviews federal and state regulations and statutory mandates, federal Centers for Medicare and Medicaid Services (CMS) directives and provides leadership and direction in the planning, development, interpretation, implementation and evaluation of established program policies and procedures.
20%	Plans, organizes, directs, oversees, and manages the activities of the Division. Continuously monitors federal and state issues that affect eligibility policy and implementation. Develops and implements new eligibility categories and programs based upon changes in federal and state laws. Provides direct supervision of the MCED assistant division chief and branch managers, evaluates staff performance, initiates corrective action for employees when necessary, and reviews personnel needs. Has responsibility for overseeing the development of needed budget and legislative change concepts and proposals specific to the division.
10%	Participates in DHCS' annual budgeting process, including reviewing budget change concepts and budget change proposals, reviewing personnel needs and actions, representing the division in meetings with the DHCS Director's Office, control agencies including DOF, Legislative Analyst's Office, and Legislature; monitors the budget process to determine its impact on the Division's programs. Participates in the Medi-Cal Estimate process with the Fiscal Forecasting Division to develop the eligibility-related cost components of the Medi-Cal Local Assistance Budget including county administrative activities related to Medi-Cal eligibility determinations.

Description of Duties:	
% of Time	**Essential Functions**

Description of Duties	
% Of Time	**Essential Functions**
% Of Time	**Marginal Functions**
10%	Coordinates with other DHCS divisions to ensure that Medi-Cal and CHIP eligibility policy interpretations and implementations are consistent and follow state and federal statutes, regulations, and policies. Performs other duties as required.

Supervision Received: Under General Direction by the (enter supervisor classification): Assistant Deputy Director, HCBE (CEA C).

Supervision Exercised: (check all that apply) ☐ Non-Supervisory Classification / None

☑ Clerical Staff ☑ Analytical Staff ☑ Technical Staff
☑ Professional Staff ☑ Supervisory Staff ☑ Managerial Staff

Special Requirements:

☐ Medical Evaluation /Clearance ☐ Typing Certificate ☐ Valid Driver's License
☐ Background Check / Finger Printing Clearance
☐ Valid Professional License (please specify): _____

Desirable Qualifications:

• Strong leadership, interpersonal, and problem-solving skills.
• Demonstrated ability to perform high-level administrative, management, policy development, and implementation.
• Demonstrated experience in a County leadership/management role overseeing staff responsible for eligibility determination processes.
• Demonstrated knowledge of the State's Medi-Cal and CHIP programs, policies, regulations, and systems governing administration of eligibility determinations, Medi-Cal benefits, claims processing, and managed care.
• Demonstrated knowledge of the trends and issues in public health policy, including those that relate to eligibility determinations.
• Excellent analytical and problem-solving skills, including quickly identifying priorities and major issues.
• Demonstrated ability to perform high-level administrative, management, policy development, and

Working Conditions (Check all that apply):

Prolonged Periods of:
☐ Standing ☑ Sitting ☐ Kneeling ☐ Bending

Travel May be Required:
☐ Occasional ☐ Over Night

Requires Lifting of Heavy Objects up to: _____

Acknowledgements:

Human Resources Acknowledgement: The Human Resources Division has reviewed and approved this duty statement.

Analyst Name:	Analyst Signature:	Date:

Employee Acknowledgement: I have discussed with my supervisor the duties of the position and have received a copy of this duty statement.

Employee Name:	Employee Signature:	Date:

Supervisor Acknowledgement: I certify this duty statement represents an accurate description of the essential functions of this position. I have discussed the duties of this position with the employee and provided the employee a copy of this duty statement.

Supervisor Name:	Supervisor Signature:	Date: